

PTO/SB/17 (12-04V2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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 Effective on 12/08/04.
 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$120.00)

RECEIVED	
CENTRAL FAX CENTER	
Application Number	10/706,202
Filing Date	November 12, 2003
First Named Inventor	Rafael L. Espinoza et al
Examiner Name	Jafar F. Parsa
Art Unit	1621
Attorney Docket No.	1856-40900 (9936 & 9919)

NOV 29 2005

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: **16-1575** Deposit Account Name: **ConocoPhillips Company**
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

	<u>Small Entity</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other (e.g., late filing surcharge): **EXTENSION FEE FOR FIRST MONTH (37 CFR 1.17(a)(1))** \$120.00

SUBMITTED BY

Signature	<i>Beatrice C. Ortega</i>	Registration No. (Attorney/Agent)	54,350	Telephone	(281) 293-4751
Name (Print/Type)	Beatrice C. Ortega	Date	November 29, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including time you require to complete this form and/or suggestions for reducing this burden. Any comments on the burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PAGE 3/21 * RCVD AT 11/29/2005 8:00:03 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/25 * DNI:2738300 * CSID:281 293 3700 * DURATION (mm:ss):06:34:00

FAX TRANSMITTAL COVER SHEET

TO: U. S. Patent and Trademark Office
Technology Center 1600
Attn: Examiner, Jafar F. Parsa
Art Unit: 1621

RECEIVED
CENTRAL FAX CENTER

NOV 29 2005

FAX No.: (571) 273-8300

DATE: November 29, 2005

FROM: Beatrice C. Ortego – Reg. 54,350

ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079-1175

TELEPHONE: (281) 293-4751
FAX: (281) 293-3700

CLIENT NO.: 1856-40900 (9936 & 9919)

TOTAL NUMBER OF PAGES (INCLUDING THIS ONE): 20

COMMENTS: Re: U.S. Patent Application No. 10/706,202
Filing Date: November 12, 2003
Applicant(s): Rafael L. Espinoza et al

The following documents are attached for filing:

- *Transmittal Form (PTO/SB/21) – 1 page*
- *Fee Transmittal Form (PTO/SB/17) – 1 page*
- *Petition for Extension of Time (PTO/SB/23) – 2 pages (including duplicate)*
- *Response to Office Action of July 29, 2005 – 16 pages*

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being sent by facsimile transmission on the date shown below to the facsimile number above to the U.S. Patent and Trademark Office, in accordance with 37 CFR § 1.6(d).

Beatrice C. Ortego
(Type or print name of person faxing paper)

Date: November 29, 2005

Beatrice C. Ortego
(Signature of person faxing paper)

This facsimile and the information it contains is intended to be a confidential communication only to the person or entity to whom it is addressed. If you have received this facsimile in error, please notify us by telephone.

PTO/SB/21 (04-04)

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TRANSMITTAL FORM

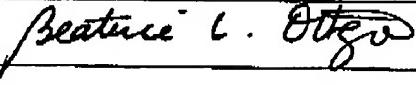
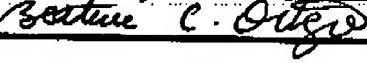
(to be used for all correspondence after initial filing)

		Application Number	10/706,202
		Filing Date	November 12, 2003
		First Named Inventor	Rafael L. Espinoza et al
		Art Unit	1621
		Examiner Name	Jafar F. Parsa
Total Number of Pages in This Submission	20	Attorney Docket Number	1856-40900 (9936 & 9919)

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): <i>Fax CoverSheet</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Beatrice C. Ortega - Reg. 54,350		
Signature			
Date	November 29, 2005		
CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	Beatrice C. Ortega - Reg. 54,350		
Signature		Date	November 29, 2005

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